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INTELLECTUAL PROPERTY LAW

JFW

March 28, 2006

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Our Reference: 13210 - 20

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

The Commissioner for Patents
PO Box 1450
Alexandria, Virginia
U.S.A 22313-1450

Dear Sir:

Re: United States Patent Application No. 10/785,999
For: KEYBOARD FOR MOBILE DEVICES
Filed: February 26, 2004
Applicant: SKARINE, Alexei

In accordance with 37 CFR 1.56 and 1.97, subject to the waiver of the requirements of 37 CFR 1.98(a)(2)(i) provided by the United States Patent and Trademark Office Notice dated August 5, 2003, the Applicant hereby submits a Supplemental Information Disclosure Statement including (1) a listing, on PTO form 1449, of patents and other publications of which the applicant is aware that may be considered material to patentability, and (2) a copy of the listed publication.

Please have these documents recorded against the above-mentioned application.

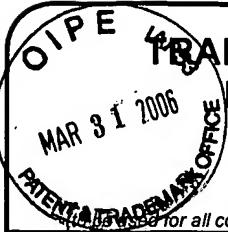
Respectfully submitted,

Kendrick Lo
Registration No. 54,948

/sc
Encl.

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 TRANSMITTAL FORM		Application Number	10/785,999
		Filing Date	February 26, 2004
		First Named Inventor	SKARINE, Alexei
		Art Unit	2673
		Examiner Name	
Total Number of Pages in This Submission		Attorney Docket Number	13210-20

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return receipt card Copies of cited reference
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Bereskin & Parr		
Signature			
Printed Name	Kendrick Lo		
Date	March 27, 2006	Reg. No.	54,948

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name			Date

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



PTO/SB/08b(08-03)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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 Substitute for Form 1449B/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				<i>Application Number</i>	10/785,999
				<i>Filing Date</i>	February 26, 2004
				<i>First Named Inventor</i>	SKARINE, Alexei
				<i>Art Unit</i>	2673
				<i>Examiner Name</i>	n/a
Sheet	1	of	1	<i>Attorney Docket Number</i>	13210-20

Examiner Signature		Date Considered	
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***EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

Applicant's unique citation designation number (optional). Applicant is to place a check mark here if English language translation is attached. This collection of information is required by 37 CFR 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 120 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.